



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

06/06/2003

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NJD070570122

INSTALLATION NAME

SYMRISE INC

INSTALLATION ADDRESS

**300 NORTH ST
TETERBORO, NJ 07608**

MAILING ADDRESS

**300 NORTH ST
TETERBORO, NJ 07608**

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056**

**TO: SYMRISE INC
or Current Occupant
ATTN: SALVATORE CASCONI
300 NORTH ST
TETERBORO, NJ, 07608**

name change

ENVIRONMENTAL PROTECTION AGENCY, REGION II

2003 MAY 27 PM 4:00

RCRA PROGRAMS BRANCH

MAIL THE COMPLETED FORM TO: The Appropriate State or EPA Regional Office.		United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM			
1. Reason for Submittal (See Instructions on page 23) MARK CORRECT BOX(ES)		Reason for Submittal: <input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input checked="" type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information). <i>name change</i> <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input type="checkbox"/> As a component of the Hazardous Waste Report.			
2. Site EPA ID Number (See instructions on page 24)		EPA ID Number: <u>NJD070570122</u>			
3. Site Name (See instructions on page 24)		Name: <u>SYMRISE INC.</u>			
4. Site Location Information (See Instructions on page 24)		Street Address: <u>300 NORTH STREET</u>			
		City, Town, or Village: <u>TETERBORO</u>	State: <u>NEW JERSEY</u>		
		County Name: <u>BERGEN</u>	Zip Code: <u>07608</u>		
5. Site Land Type (See instructions on page 24)		Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
6. North American Industry Classification System (NAICS) Code(s) for the Site (See Instructions on page 24)		A. <u>311942</u>	B. <u>325620</u>		
		C.	D.		
7. Site Mailing Address (See Instructions on page 25)		Street or P. O. Box: <u>300 NORTH STREET</u>			
		City, Town, or Village: <u>TETERBORO</u>			
		State: <u>NEW JERSEY</u>			
		Country: <u>U.S.A.</u>	Zip Code: <u>07608</u>		
8. Site Contact Person (See instructions on page 25)		First Name: <u>SALVATORE</u>	MI: <u>M.</u>	Last Name: <u>CASCONE</u>	
		Phone Number: <u>973-774-6022</u>		Phone Number Extension:	
9. Legal Owner and Operator of the Site (See instructions on pages 25 to 26)		A. Name of Site's Legal Owner: <u>SYMRISE INC.</u>		Date Became Owner (mm/dd/yyyy): <u>05/01/2003</u>	
		Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			
		B. Name of Site's Operator: <u>SYMRISE INC.</u>		Date Became Operator (mm/dd/yyyy): <u>05/01/2003</u>	
		Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other			

EPA ID No. NJD070570122

10. Type of Regulated Waste Activity (Mark the appropriate boxes for activities that apply to your site. See instructions on pages 26 to 30)

A. Hazardous Waste Activities

1. Generator of Hazardous Waste

(Choose only one of the following three categories.)

- ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or
- ☒ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or
- ☐ c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste

In addition, indicate other generator activities. (Mark all that apply)

- ☐ d. United States Importer of Hazardous Waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

For Items 2 through 6, mark all that apply.

- ☐ 2. Transporter of Hazardous Waste
- ☐ 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.
- ☐ 4. Recycler of Hazardous Waste (at your site) Note: A hazardous waste permit may be required for this activity.
5. Exempt Boiler and/or Industrial Furnace
- ☐ a. Small Quantity On-site Burner Exemption
- ☐ b. Smelting, Melting, and Refining Furnace Exemption
- ☐ 6. Underground Injection Control

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (Mark all boxes that apply):

	Generate	Accumulate
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities (Mark all boxes that apply.)

1. Used Oil Transporter - Indicate Type(s) of Activity(ies)
- ☐ a. Transporter
- ☐ b. Transfer Facility
2. Used Oil Processor and/or Re-refiner - Indicate Type(s) of Activity(ies)
- ☐ a. Processor
- ☐ b. Re-refiner
- ☐ 3. Off-Specification Used Oil Burner
4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies)
- ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (See instructions on page 31)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

2003 MAY 27 PM 4:00
 RCRA PROGRAMS
 BRANCH
 ENVIRONMENTAL PROTECTION
 AGENCY, REGION II

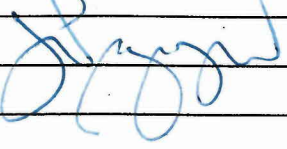
EPA ID No. NJ D070570122

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 31)

SECTION 9A. - THE PREVIOUS OWNER WAS HAARMANN & REIMER

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system; or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (See instructions on page 31)

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	JAMES PRZYBOROWSKI / MGR-ENGINEERING	05/16/2003

ENVIRONMENTAL PROTECTION
AGENCY REGION II
2003 MAY 27 PM 4:00
RCRA PROGRAMS
BRANCH

ENVIRONMENTAL PROTECTION
AGENCY, REGION II

2003 MAY 27 PM 5:07

RCRA PROGRAMS
BRANCH

symrise



creating brands. supporting brands.

CERTIFIED MAIL 7000 0600 0028 5156 6653
RETURN RECEIPT REQUESTED

300 North Street
Teterboro, NJ 07608
Tel. (201) 288-3200
Fax (201) 288-0843

May 14, 2003

U.S.E.P.A. Region 2
Division of Environmental Planning & Protection
RCRA Programs Branch, 22nd Floor
290 Broadway
New York, NY 10007-1866

Subject: Name Change / Haarmann & Reimer to Symrise Inc.
300 North Street, Teterboro, NJ 07608
EPA ID# NJD070570122

Dear Sir or Madam,

Haarmann and Reimer, currently located at 300 North Street NJ, is in the process of changing its company name to Symrise Inc. to reflect its new global identity after a merger this year with partner company Dragoco. This name change will not affect the nature of our business, products or manufacturing processes. Attached please find a completed RCRA Hazardous Waste Part A Permit Application, which provides the appropriate Subsequent Notification.

If you have any questions or need any additional information, please feel free to contact me at (908) 429-6852 or (201) 462-2372.

Sincerely,

James J. Przyborowski
Manager, Site Engineering
Symrise Inc.

cc. M. Cavender -- Symrise Inc.
File -- 309.08
NJDEP, Bureau of Hazardous Waste



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/21/97

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA ID. NUMBER ->	NJD070570122
FACILITY NAME ->	H & R FLORASYNTH
MAILING ADDRESS ->	300 NORTH ST TETERBORO, NJ 07608
INSTALLATION ADDRESS ->	300 NORTH ST TETERBORO, NJ 07608

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL.
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: SPARACO, PETER
MGR ENVIRON AFF
H & R FLORASYNTH
170-180 INDUSTRIAL PKWY
BRANCHBURG, NJ 08876

Please print or type with ELITE

Only original signature of the Generator is acceptable.

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

N J D 0 7 0 5 7 0 1 2 2

II. Name of Installation (Include company and specific site name)

H & R FLORASYNTH

III. Location of Installation Requires Building Number or Latitude and Longitude for processing.

Street

3 0 0 N O R T H S T R E E T

Street (Continued)

City or Town

T E T E R B O R O

State

Zip Code

N J

0 7 6 0 8

County Name

B E R G E N

IV. Installation Mailing Address

Street or P.O. Box

S A M E A S A B O V E

City or Town

State

Zip Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

S P A R A C O

P E T E R

Job Title

Phone Number (Area Code and Number)

M G R E N V I R O N A F F A I R 9 0 8 - 8 5 1 - 4 4 6 2

VI. Installation Contact Address

A. Contact Address
Location Mailing Other

B. Street or P.O. Box

☐
☒
☐

1 7 0 - 1 8 0 I N D U S T R I A L P A R K W A Y

City or Town

State

Zip Code

B R A N C H B U R G

N J

0 8 8 7 6

VII. Ownership

A. Name of Installation's Legal Owner

H A A R M A N N & R E I M E R T / A H & R F L O R A S Y N T H

Street, P.O. Box, or Route Number

3 0 0 N O R T H S T R E E T

City or Town

State

Zip Code

T E T E R B O R O

N J

0 7 6 0 8

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

Month (Date Changed) Day Year

2 0 1 - 2 8 8 - 3 2 0 0

P

P

Yes

X

No

0 1 0 1 9 7

From: Jack Hoyt, AAMD, EPA, Region 2, 290 Broadway, 22 Fl.
New York, NY 10007-1866. Tel: (212) 637 4106

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions)

A. Hazardous Waste Activity

1. Generator (See instructions)
☐ a. Greater than 1000kg/mo (2,200 lbs.)
☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes
- Mode of Transportation
☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify
3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace
☐ 1. Smelter Deferral
☐ 2. Small Quantity Exemption
Indicate Type of Combustion Device(s)
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
☐ a. Transporter
☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
☐ a. Process
☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☒ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
- ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1 D009	2 F003	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number, See instructions.)

1	2	3	4	5	6
---	---	---	---	---	---

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature ORIGINAL GENERATOR

Name and Official Title (Type or print)

Date Signed

Peter SparacoPETER SPARACO
MANAGER, ENVIRONMENTAL AFFAIRS4/3/97

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

Please print or type with ELITE



To avoid delays in processing, please complete all sections.
Only original signature of the Generator is acceptable.

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

99

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

N J D 0 7 0 5 7 0 1 2 2

II. Name of Installation (Include company and specific site name)

H A A R M A N N & R E I M E R

III. Location of Installation Requires Building Number or Latitude and Longitude for processing.

Street

3 0 0 N O R T H S T R E E T

Street (Continued)

City or Town

T E T E R B O R O

State

Zip Code

N J 0 7 6 0 8

COUNTY CODE

County Name

B E R G E N

IV. Installation Mailing Address

Street or P.O. Box

S A M E A S A B O V E

City or Town

State

Zip Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

S P A R A C O

P E T E R

Job Title

Phone Number (Area Code and Number)

M E R E N V I R O N M E N T A L A F F A I R S

VI. Installation Contact Address

A. Contract Address
Location Mailing Other

B. Street or P.O. Box

☒

City or Town

State

Zip Code

VII. Ownership PROPERTY

A. Name of Installation's Legal Owner

H A A R M A N N & R E I M E R

Street, P.O. Box, or Route Number

3 0 0 N O R T H S T R E E T

City or Town

State

Zip Code

T E T E R B O R O

N J 0 7 6 0 8

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed) Month Day Year

2 0 1 2 8 8 3 2 0 0

P

P

Yes

No

From: Jack Hoyt, AWMD, KPA, Region 2, 290 Broadway, 22 Fl.
New York, NY 10007-1866. Tel; (212) 637 4106

Address verified us Post office 08

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions)

A. Hazardous Waste Activity

1. Generator (See instructions)

- ☒ a. Greater than 1000kg/mo (2,200 lbs.)
☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)

2. Transporter (Indicate Mode in boxes 1-5 below)

- ☐ a. For own waste only
☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.

4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner
☐ b. Other Marketers

- ☐ c. Boiler and/or Industrial Furnace

- ☐ 1. Smelter Deferral
☐ 2. Small Quantity Exemption
Indicate Type of Combustion Device(s)

- ☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace

5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer

- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)

- ☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace

3. Used Oil Transporter - Indicate Type(s) of Activity(ies)

- ☐ a. Transporter
☐ b. Transfer Facility

4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Process
☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)



2. Corrosive (D002)



3. Reactive (D003)



4. Toxicity Characteristic



(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1
D1009
7

2
F1003
8

3
9

4
10

5
11

6
12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1

2

3

4

5

6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature ORIGINAL

Peter Sparaco

Name and Official Title (Type or print)

PETER SPARACO
MANAGER, ENVIRONMENTAL AFFAIRS

Date Signed

2/8/00

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)



CERTIFIED MAIL No. Z 354 742 545

February 10, 2000

USEPA Region II
Waste Management
Jack Hoyt - RCRA Notifications
290 Broadway - 22nd Floor
New York, NJ 10007-1866

Haarmann & Reimer

U.S. EPA
AGENCY RO II

300 North Street
Teterboro, NJ 07608

Telephone: (201) 288-3200

Facsimile: (201) 462-2100

00 FEB 15 2001: 58

HAZARDOUS & SOLID WASTE
PROGRAM BRANCH
Bayer AG

Re: Request to Deactivate EPA ID. Numbers / Notification of Company Name
Change / Haarmann & Reimer

Dear Mr. Hoyt:

Please be advised that Haarmann & Reimer T/A H&R Florasynth (trade name H&R Florasynth) has dropped its trade name and is now called Haarmann & Reimer. Please use this new name in all future correspondence. This new name applies to the New Jersey sites indicated on the two (2) attached EPA Notification of Regulated Waste Activity Forms.

Also be advised that Haarmann & Reimer has relocated from its 70 Diamond Road, Springfield, New Jersey site to an existing site at 300 North Street, Teterboro, New Jersey, which already has an EPA ID Number. Please deactivate EPA ID# NJD055084438 for the 70 Diamond Road facility.

Feel free to call me at 908-429-6871 if you have questions or concerns or require additional information.

Sincerely,

Peter F. Sparaco
Manager, Environmental Affairs and Quality
Haarmann & Reimer

/amk

Enclosure

Cc: File 309.04

